

County: Milwaukee
 WEST ALLIS CARE CENTER
 6700 WEST BELOIT ROAD

Facility ID: 8380

Page 1

WEST ALLIS 53219 Phone: (414) 541-9840
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 61
 Total Licensed Bed Capacity (12/31/01): 74
 Number of Residents on 12/31/01: 50

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 52

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		34.0
Supp. Home Care-Personal Care	No					1 - 4 Years		40.0
Supp. Home Care-Household Services	No	Developmental Disabilities	2.0	Under 65	2.0	More Than 4 Years		26.0
Day Services	No	Mental Illness (Org./Psy)	38.0	65 - 74	10.0			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	32.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.0	95 & Over	8.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	18.0	65 & Over	98.0	-----		
Transportation	No	Cerebrovascular	24.0		-----	RNs		4.0
Referral Service	No	Diabetes	2.0	Sex	%	LPNs		8.7
Other Services	No	Respiratory	4.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	8.0	Male	0.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	100.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)					
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	
Skilled Care	5	100.0	251	31	91.2	108	0	0.0	0	9	100.0	138	2	100.0	108	0	0.0	0	47	94.0
Intermediate	---	---	---	3	8.8	89	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	6.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		34	100.0		0	0.0		9	100.0		2	100.0		0	0.0		50	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	4.3	Daily Living (ADL)	Independent			
Private Home/With Home Health	4.3	Bathing	0.0	52.0	48.0	50
Other Nursing Homes	4.3	Dressing	6.0	64.0	30.0	50
Acute Care Hospitals	73.9	Transferring	22.0	38.0	40.0	50
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	10.0	42.0	48.0	50
Rehabilitation Hospitals	0.0	Eating	54.0	26.0	20.0	50
Other Locations	13.0	*****				
Total Number of Admissions	46	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.0	Receiving Respiratory Care		8.0
Private Home/No Home Health	7.3	Occ/Freq. Incontinent of Bladder	76.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	30.9	Occ/Freq. Incontinent of Bowel	76.0	Receiving Suctioning		0.0
Other Nursing Homes	5.5			Receiving Ostomy Care		0.0
Acute Care Hospitals	5.5	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	2.0	Receiving Mechanically Altered Diets		38.0
Rehabilitation Hospitals	0.0					
Other Locations	9.1	Skin Care		Other Resident Characteristics		
Deaths	41.8	With Pressure Sores	12.0	Have Advance Directives		96.0
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	55			Receiving Psychoactive Drugs		58.0

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	69.8	77.1	0.90	86.3	0.81	82.7	0.84	84.6	0.83
Current Residents from In-County	96.0	82.7	1.16	89.4	1.07	85.3	1.13	77.0	1.25
Admissions from In-County, Still Residing	32.6	19.1	1.71	19.7	1.66	21.2	1.54	20.8	1.57
Admissions/Average Daily Census	88.5	173.2	0.51	180.6	0.49	148.4	0.60	128.9	0.69
Discharges/Average Daily Census	105.8	173.8	0.61	184.0	0.57	150.4	0.70	130.0	0.81
Discharges To Private Residence/Average Daily Census	40.4	71.5	0.57	80.3	0.50	58.0	0.70	52.8	0.77
Residents Receiving Skilled Care	94.0	92.8	1.01	95.1	0.99	91.7	1.03	85.3	1.10
Residents Aged 65 and Older	98.0	86.6	1.13	90.6	1.08	91.6	1.07	87.5	1.12
Title 19 (Medicaid) Funded Residents	68.0	71.1	0.96	51.8	1.31	64.4	1.06	68.7	0.99
Private Pay Funded Residents	18.0	13.9	1.30	32.8	0.55	23.8	0.76	22.0	0.82
Developmentally Disabled Residents	2.0	1.3	1.49	1.3	1.51	0.9	2.13	7.6	0.26
Mentally Ill Residents	38.0	32.5	1.17	32.1	1.18	32.2	1.18	33.8	1.12
General Medical Service Residents	8.0	20.2	0.40	22.8	0.35	23.2	0.35	19.4	0.41
Impaired ADL (Mean)	60.0	52.6	1.14	50.0	1.20	51.3	1.17	49.3	1.22
Psychological Problems	58.0	48.8	1.19	55.2	1.05	50.5	1.15	51.9	1.12
Nursing Care Required (Mean)	7.3	7.3	0.99	7.8	0.93	7.2	1.01	7.3	0.99